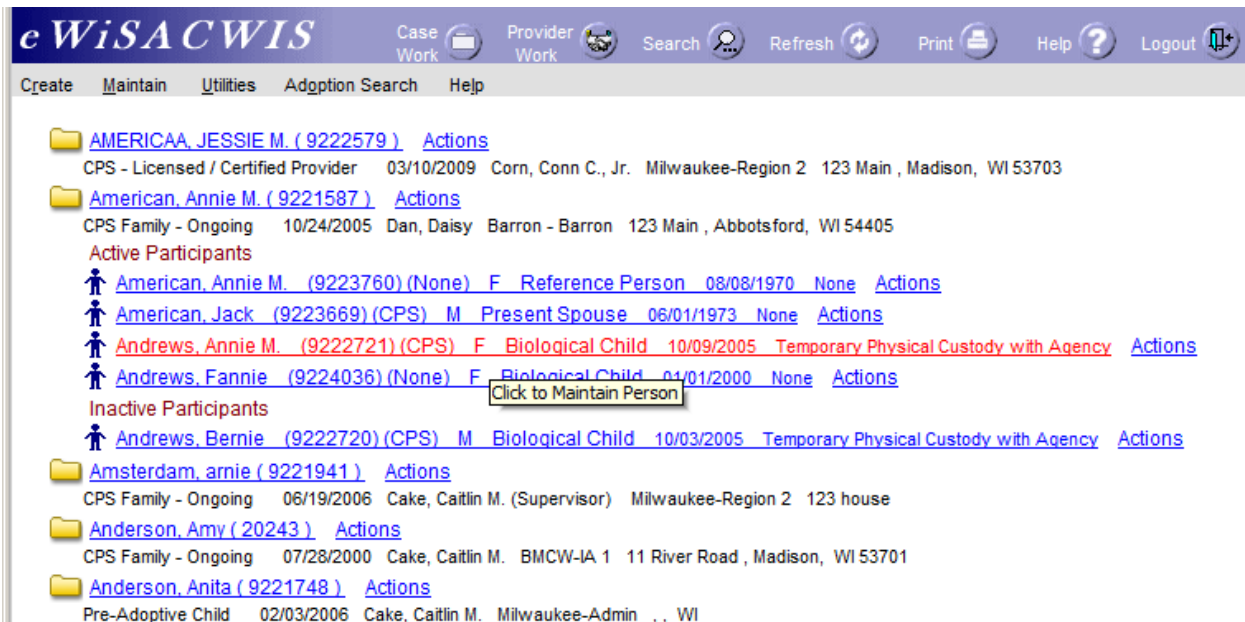


# Person Management

1. From the desktop, there are two ways to access the Person Management page:
  - a. The first is to select the Participant View checkbox:



Then expand your case and select the participant to open the Person Management page:



- b. The second is to click on the case name to open the Maintain Case page:

**eWiSACWIS** Case Work Provider Work Search Refresh Print Help

Create Maintain Utilities Adoption Search Help

- [Altman, Simon \( 9220003 \) Actions](#)  
CPS Family - Ongoing 12/10/2001 Clark, Supervisor BMCW-Admin 33 Marion Ave. , Madison, WI 53705
- [AMERICAA, JESSIE M. \( 9222579 \) Actions](#)  
CPS - Licensed / Certified Provider 03/10/2009 Corn, Conn C., Jr. Milwaukee-Region 2 123 Main , Madison, WI 53703
- [American, Annie M. \( 9221587 \) Actions](#)  
CPS Family - Ongoing 10/24/2005 Dan, Daisy Barron - Barron 123 Main , Abbotsford, WI 54405
- [Amsterdam, arnie \( 92219417 \) Actions](#)  
CPS Family - Ongoing 06/19/2006 Cake, Caitlin M. (Supervisor) Milwaukee-Region 2 123 house
- [Anderson, Amy \( 20243 \) Actions](#)  
CPS Family - Ongoing 07/28/2000 Cake, Caitlin M. BMCW-IA 1 11 River Road , Madison, WI 53701
- [Anderson, Anita \( 9221748 \) Actions](#)  
Pre-Adoptive Child 02/03/2006 Cake, Caitlin M. Milwaukee-Admin , , WI

Then click on the name of the participant in the Active Participants group box (or Inactive Participants group box by expanding the Inactive Participants expando) to open the Person Management page:

**Maintain Case - ID: 9221587 - Windows Internet Explorer**

**eWiSACWIS** Print Spell Check Help

Case: 9221587

Name: American, Annie M. Case Type: CPS Family - Ongoing Status: Open 10/24/2005

County: Barron Site/Region: Barron - Barron

CARES Case #: County Case #: ☐ Restricted Designation: [Select Program](#)

Participants		Address		Collaterals		Closing/Merge History	
<b>Active Participants</b>							
Name	Person Type	Rsp	Hshld	DOB	Gndr	Relationship	Legal
<a href="#">American, Annie M. (9223760)</a>	None	<input checked="" type="checkbox"/>	U	08/08/1970	F	Reference Person	N/A
<a href="#">American, Jack (9223669)</a>	CPS	<input checked="" type="checkbox"/>	U	06/01/1973	M	Present Spouse	N/A
<a href="#">Andrews, Annie M. (9222721)</a>	CPS	<input checked="" type="checkbox"/>	Y	10/09/2005	F	Biological Child	Tempor: Physical Custody with Agency
<a href="#">Andrews, Fannie (9224036)</a>	None	<input checked="" type="checkbox"/>	Y	01/01/2000	F	Biological Child	N/A
Number of Household Members: 2							<a href="#">Insert</a>
<b>Inactive Participants</b>							

Options:  [Go](#) [Save](#) [Close](#)

- Among other demographic information, the Basic tab of Person Management displays the First and Last Names. These fields are editable and should be used when a name needs to be updated. Most of a person's demographic information is entered on this tab. The red fields are Adoption and Foster Care Analysis and Reporting System (AFCARS) elements. It is important to complete as much of this information as is appropriate and possible.

The KIDS Data Comparison hyperlink will appear in the lower left corner of the Basic group box only when eWiSACWIS has received verified demographic or address information from KIDS. Clicking this hyperlink opens the KIDS Data Comparison page where the demographic and address information from KIDS can be accepted. See the KIDS Data Comparison Quick Reference Guide for additional information.

**Person Management 'Andrews, Annie M. (9222721)' -- Webpage Dialog**

**eWiSACWIS** TM Print Spell Check ABC Help ?

**Basic** Parent Info Additional Address Education Characteristics Medical/Mental Health

**Name**  
 ID: 9222721 Prefix: [ ] First Name: Annie MI: M Last Name: Andrews Suffix: [ ]  
 Person Type: CPS

**Basic**  
 Gender: Female US Citizen Status: U.S. Citizen County Person ID: [ ]  
 Birth Date: 10/09/2005 Citizenship Verification: Birth Certificate SSN: 111-11-1111  
 Commitment#: - Birth Place: [ ] Death Date: 00/00/0000  
 Wisconsin Resident: Yes Identity: [ ] HSRS ID: [ ]  
 Religion: [ ] Marital Status: [ ] MCI ID: [ ]  
☐ Interpreter Required Primary Language: English Second Language: [ ]  
 Third Language: [ ] Fourth Language: [ ]

**Race/Ethnicity/Tribal Identification**  
 Race: White Ethnicity: Caucasian Hispanic/Latino: No  
 Race: [ ] Indian Tribe: [ ] Indian Tribe 2: [ ]  
 Race: [ ] Clan: [ ] Clan 2: [ ]  
 Race: [ ] Status: [ ] Status 2: [ ]  
 Race: [ ] Tribal Membership #: [ ]

**Adoption Information**  
 Child was previously Adopted: No Type of Adoption: Details [ ]  
 Age Adopted: [ ] Pre-Adoptive Relationship to [ ]  
☐ Child Receives WI  
 Options: [ ] Go Save Close

- The Person Type is similar to the case type but is person specific. The Person Type is automatically set by eWiSACWIS in most instances. In other instances, the Person Type needs to be selected for a child who has involvement with county or state child welfare or juvenile justice agency.
- To update the Person Type, click the Person Type hyperlink. This will open the Person Type page.

5. On the Person Type page, select or unselect the appropriate role(s).

Person Type -- Webpage Dialog

**eWiSACWIS** Print Spell Check Help

**Person**

Name: Andrews, Annie M.

**Roles**

Select	Person Type
<input type="checkbox"/>	Adoption Interstate Compact on Adoption and Medical Assistance (Adopt ICAMA)
<input type="checkbox"/>	Adoption (Adopt)
<input type="checkbox"/>	Child Welfare (CW)
<input checked="" type="checkbox"/>	Child Protective Services (CPS)
<input type="checkbox"/>	DCF Guardianship - County Custody (DCF Guard)
<input type="checkbox"/>	Interstate Compact on the Placement of Children (ICPC)
<input type="checkbox"/>	ICPC Pre-Adoptive Child (ICPC Pre-Adopt)
<input type="checkbox"/>	Juvenile Justice (JJ)
<input type="checkbox"/>	Pre-Adoptive Child (Pre-Adopt)
<input type="checkbox"/>	Subsidized Guardianship ICAMA (SG-ICAMA)
<input type="checkbox"/>	Subsidized Guardianship (SG)
<input type="checkbox"/>	Voluntary Kinship (VKC)

Continue Close

6. The Parent Info tab allows for documentation of the child's mother and father and information about them: marriage information and social/mental/physical conditions. The Search hyperlinks are used to search out the correct person for the corresponding sections. You have the option of entering the child's Guardian, Indian Custodian and/or the Legal Custodian. Once selected you can search, edit or remove any of searched out people. Information entered into the Adoption Referral group box will pre-fill into the Adoption Referral itself.

Person Management 'Andrews, Annie M. (9222721)' -- Webpage Dialog

**eWiSACWIS** TM Print Spell Check Help

Basic **Parent Info** Additional Address Education Characteristics Medical/Mental Health

**Person Information**

**Child's Mother:** Annie M American [Search](#) [Edit](#) [Remove](#)

Spouse:

Type:

Current Marital Status:

**Mother Married at Child's Birth:**

☐ Mother TPR

Current Relationship of Parents to Each Other:

Child's Guardian (1): [Search](#) Child's Guardian (2): [Search](#)

Indian Custodian (1): [Search](#) Indian Custodian (2): [Search](#)

Legal Custodian (1): [Search](#) Legal Custodian (2): [Search](#)

**Child's Father:** Jack American [Search](#) [Edit](#) [Remove](#)

Spouse:

Type:  PA Number:

Current Marital Status:

Father Married at Child's Birth:

☐ Father TPR

☐ Relinquishment Case

**Adoption Referral**

**Birth Mother**

Social/Mental/Physical Conditions:

[Add/Edit](#)

**Birth Father**

Social/Mental/Physical Conditions:

[Add/Edit](#)

Options:  [Go](#)

[Save](#) [Close](#)

- The Additional tab is used to identify AKA Names (other names the participant may or have used such as maiden names, nicknames, previous married names, and aliases). The Search function (used elsewhere in the system) can be used to search based on the AKA Names if the information has been entered on this tab. Background Checks which have been completed are displayed on this tab (see the Background Check Quick Reference Guide). This tab also documents whether the child is a Teen Parent and Kinship information. Finally, relationships between all participants in a case are displayed on this tab.

Person Management 'Andrews, Annie M. (9222721)' -- Webpage Dialog

**eWiSACWIS** TM Print Spell Check ABC Help ?

Basic Parent Info **Additional** Address Education Characteristics Medical/Mental Health

**AKA Names**

Entry Date	Type	First Name	Last Name	MI	Delete
04/27/2010	Also Known As	Ann	Andrews		<a href="#">Delete</a>

[Insert](#)

**Background Checks**

**Child Information**

☐ Child is a Teen Parent CARES PIN:

☐ Teen Parent's Child Resides with Him/Her Monthly Amount of any Child Unearned Income:

☐ Teen Parent's Child Receives a Kinship Payment ☐ Child Receives a Disability Payment

**Relationship**

Case ID	First Name	Last Name	MI	Relationship	Entry Date
9221587	Bernie	Andrews		Biological Child	10/24/2005
9221587	Annie	Andrews	M	Biological Child	10/24/2005
9221587	Jack	American		Present Spouse	06/05/2006

Options:  [Go](#) [Save](#) [Close](#)

8. The Address tab is used to document current and historical addresses that the participant is/was associated with. When creating an Out of Home Placement, the system will automatically update the child's current Primary Residence address (on the Address tab of Person Management) with the provider's address and the address will not be editable. Additionally, the address for a home provider cannot be updated via the Person Management page (it must be done via the Create Physical Address page via the provider record).

When the View All Addresses checkbox is unchecked, all addresses associated with the Person record where the "Entry Date" is equal to the "End Date" will be hidden from view and not displayed. When the checkbox is checked, all addresses associated with the Person record will be displayed on the page.

The Insert button on the bottom of the page allows a new address to be inserted.

The screenshot shows a web browser window titled "Person Management 'Andrews, Annie M. (9222721)' -- Webpage Dialog". The page features the "eWiSACWIS" logo and navigation tabs: Basic, Parent Info, Additional, Address (selected), Education, Characteristics, and Medical/Mental Health. In the Address tab, there is a checkbox labeled "View All Addresses" which is currently unchecked. Below this, the "Primary Residence" is listed with the date range "10/24/2005 - Present" and links for "Edit" and "Delete". The address details are "123 Main Street" and "Abbotsford, WI 54405 United States". At the bottom right of the address list area is an "Insert" button. At the bottom of the page, there is an "Options:" dropdown menu with a "Go" button next to it, and "Save" and "Close" buttons on the right.

9. There are a number of Types of addresses a person can have: Primary Residence, Mailing, Secondary Residence, Responsible Person, Last Known, Parent Home Address, Parent Not Residing in Household, and Work. Select the appropriate Type. The Entry Date defaults to today's date but can be updated.

Address Management 'Andrews, Annie M.' ID:9222721 -- Webpage Dialog

**eWiSACWIS** Print Spell Check Help

**Name**  
Name: Andrews, Annie M. ID: 9222721

**Address**  
Type: [Dropdown] Entry Date: 10/22/2012 End Date: 00/00/0000  
C/O: [Text]  
Street: [Text] [Text] [Text] Apt: [Text]  
County of Residence: [Dropdown]  
WI City: [Dropdown]  
City: [Text] State: WI ZIP: [Text] Country: United States [Dropdown]

**Phone**  
Phone: [Text] Ext: [Text] Cell: [Text] Alt Phone: [Text] Alt Ext: [Text] Fax: [Text]  
E-Mail: [Text] Secondary E-Mail: [Text]

Save Close



10. The Education tab is a record of a child's education history. See the Education Records Quick Reference Guide for additional information.

Person Management: Andrews, Annie M. (9222721) -- Webpage Dialog

**eWiSACWIS** TM Print Spell Check Help

Basic Parent Info Additional Address **Education** Characteristics Medical/Mental Health

**Basic Education Information**

☐ Child is less than age five and does not attend early education or day care. ☐ Child is less than age five and attends child care that is not early education, pre-school or 4K.

☐ The child is in an early intervention program. ☐ School district has been notified of child's placement (if age two or older).

☐ Child is in day treatment. ☐ Child was attending school but is currently listed as missing from the out-of-home placement.

☐ Child is of school age but is not attending school. Provide explanation.

☐ Child is Currently Enrolled in School Highest Grade Level Completed: Seven

Describe current academic performance. Include grade level, special achievements and current educational difficulty(s). Include the date and source of your information.

Diploma/Certificate: Diploma/Certificate Date: 00/00/0000

Anticipated High School Graduation Date: 00/00/0000 Updated On: 02/06/2015 By: Caitlin M. Cake

**Individualized Education Plan**

☐ Child has an individualized education plan. ☐ Copy of IEP in Record. ☐ Extended School Year. Last Updated By: Caitlin M. Cake

Options: Go Save Close

11. The Characteristics tab, which consists of both AFCARS and NCANDS elements, is used to document a person's Disability/Special Needs Information, Chronic/Medically Complex Conditions, Health Status Outcome Measures, and Substance Use/Behavior Problems. Primary Caretaker(s) Information can also be documented here. Before a case can be closed, the system requires a value be selected from the "Person has a Clinically Diagnosed Disability" drop-down. If Yes is selected, at least one disability must be identified. Any Standard Program Services, entered via Maintain > Standard Program Services, will also appear on this page (see the Standard Program Services Quick Reference Guide for additional information).

Person Management 'Andrews, Annie M. (9222721)' -- Webpage Dialog

**eWiSACWIS** TM Print Spell Check Help

Basic Parent Info Additional Address Education **Characteristics** Medical/Mental Health

**Disability/Special Needs Information**

Person has a Clinically Diagnosed Disability: No

☐ Learning Disability [Details](#) ☐ Other Medically Diagnosed Conditions [Details](#) ☐ Emotionally Disturbed [Details](#)

☐ Mental Retardation [Details](#) ☐ Asthma [Details](#) ☐ Diabetes [Details](#) ☐ Anxiety ☐ Depression

☐ Physically Disabled [Details](#) ☐ Seizure Disorder [Details](#) ☐ ADD ☐ Other

☐ Visually/Hearing Impaired [Details](#) ☐ Congenital Malformation [Details](#) ☐ ADHD ☐ Severe ED

☐ Reactive Attachment Disorder

**Chronic/Medically Complex Conditions**

Select those values which have been diagnosed by a physician, psychologist or other qualified mental health professional. [Details](#)

☐ Developmental Delay ☐ Medically Complex Child ☐ Medically Fragile Infant ☐ Prematurity ☐ Technology Dependent ☐ Weight Concern

**Health Status Outcome Measures**

Date Screened	Health Status Score	Health Needs Score	<a href="#">Details</a>
07/08/2011	2	A	<a href="#">Delete</a>

[Insert](#)

**Substance Use/Behavior Problem**

☐ Alcohol Freq.:  ☐ Marijuana Freq.:  ☐ Behavior Problem [Details](#)

Options:  [Go](#) [Save](#) [Close](#)

When placing your pointer over “Details,” additional information is displayed that helps to define the associated value(s).

The screenshot shows a web browser window titled "Person Management 'Andrews, Annie M. (9222721)' -- Webpage Dialog". The page is for the eWiSACWIS system. The top navigation bar includes tabs for Basic, Parent Info, Additional, Address, Education, Characteristics, and Medical/Mental Health. The "Characteristics" tab is selected.

Under the "Disability/Special Needs Information" section, there is a dropdown menu for "Person has a Clinically Diagnosed Disability:" set to "No". Below this are checkboxes for "Learning Disability", "Mental Retardation", "Physically Disabled", and "Visually/Hearing Impaired". A tooltip is displayed over the "Learning Disability" checkbox, containing the text: "Learning Disability: A disorder in one or more of the child's basic psychological processes involved in understanding or using language, spoken or written, that may manifest itself in an imperfect ability to listen, think, speak, read, write, spell or to use mathematical calculations. The term includes conditions such as perceptual disability, brain injury, minimal brain dysfunction, dyslexia, and developmental aphasia."

To the right of the tooltip, there is a checkbox for "Emotionally Disturbed" with a "Details" link. Below this are checkboxes for "Anxiety", "Depression", "ADD", "Other", "ADHD", "Severe ED", and "Reactive Attachment Disorder".

Below the "Disability/Special Needs Information" section is the "Chronic/Medically Controlled" section, which includes a "Developmental Delay" checkbox and a "Qualified mental health professional" checkbox with a "Details" link. There is also a "Maturity" checkbox, a "Technology Dependent" checkbox, and a "Weight Concern" checkbox.

The "Health Status Outcome" section includes a "Date Screened" dropdown menu set to "07/08/2011", a "Score" dropdown menu set to "2", and a "Details" link. There is also a "Delete" button.

At the bottom of the form is the "Substance Use/Behavior Problem" section, which includes checkboxes for "Alcohol Freq.", "Marijuana Freq.", and "Behavior Problem" with "Details" links. There are also "Options:" dropdown menus and "Go", "Save", and "Close" buttons.

12. In addition to other pertinent medical information, the Medical/Mental Health tab is used to document health concerns, immunizations, growth, health insurance and emergency contact information. A new health concern can be entered by selecting the Insert button within the Health Concern Information group box.

Person Management 'Andrews, Annie M. (9222721)' -- Webpage Dialog

**eWiSACWIS** TM Print Spell Check Help

Basic Parent Info Additional Address Education Characteristics **Medical/Mental Health**

**Health Concern Information**

Health Concern ▲	Medical/Provider Name	Type of Service	Provider Type	Start Date	End Date	
Details of the health concern should be documented here...	<a href="#">Thomas, River</a>	Child Protective Exam/CPC Child Protective Exam	Physician	09/23/2008	09/23/2008	<a href="#">Edit</a>
Details of the health concern should be	<a href="#">Thomas, River</a>	Child Protective	Physician	10/03/2012	10/03/2012	<a href="#">Edit</a>

**Insert**

**Basic Information**

Primary Health Care Provider:  
Physician: [Thomas, River](#) Dentist: [Smith, John](#) Mental Health:

☒ Immunization Information ☒ Immunizations Up To Date Date: 05/10/2012 ☐ Immunizations Record On File

☐ Growth Chart Measurements

☐ Health Insurance Company/HMO

☐ Child has chronic physical, mental, or emotional issues. Describe in detail.

☐ Child has had a hospitalization, surgery, emergency medical need, or significant illness in the last six months. Describe in detail.

Last AODA Evaluation: 00/00/0000 Last M/H Evaluation: 00/00/0000 Medical Assistance #:

**Emergency Contact Information**

Options:  **Go** **Save** **Close**

13. The Health Concern page is used to document a health concern, provider type, provider address and whether that provider is a primary provider. If the Primary checkbox is selected, the provider's name and his/her demographic information will pre-fill into the Permanency Plan. Type of service, begin and end dates of the service, as well as the procedure performed and any diagnoses which may have been made can also be documented here.

**Note:** If the Type of Service is Mental/Behavioral Health Screen (Medical Provider/Clinic Type = MH Professional), indicate if a mental health assessment was recommended with the associated checkbox. If the Type of Service is Comprehensive Mental Health Assessment (Medical Provider/Clinic Type = MH Professional), indicate if treatment was recommended with the associated checkbox. If the Type of Service is Child Protective Exam/CPC Child Protective Exam (Medical Provider/Clinic Type = Physician), indicate if a medical or dental follow was recommended with the associated checkboxes. If the Type of Service is Well Child Exam/Visit (Medical Provider/Clinic Type = Physician), indicate the Health Check Period. Placing your mouse over the words "Health Check Period" will display a definition of Wisconsin's Early Periodic Screening, Diagnosis and Treatment Program (EPSDT).

The screenshot shows a web browser window titled "Health Concern -- Webpage Dialog" with the eWiSACWIS logo. The form is divided into two main sections: "Health Concern Information" and "Medications".

**Health Concern Information:**

- Name: Andrews, Annie, M. Person ID: 9222721
- Health Concern: Details of the health concern should be documented here...
- Medical Provider/Clinic: Thomas, River Search Medical Provider/Clinic Type: Physician ☒ Primary?
- Type of Service: Child Protective Exam/CPC Child Protective Exam ☒ Medical Follow Up Recommended? ☒ Dental Follow Up Recommended?
- Service Begin Date: 10/03/2012 Service End Date: 10/03/2012
- Procedure: Child Protective Exam
- Diagnosis: Diagnosis if one

**Medications:**

- List of Medications
- Medication: Medication ☐ Psychotropic Delete Row 1 of 1
- Dosage /Frequency: Dosage/Frequency Prescription Start Date: 00/00/0000
- Length of Time Prescribed: Length of Time Prescribed Prescription End Date: 00/00/0000
- Reason Prescribed or Discontinued: Reason...
- Notes/Comments:
- Buttons: Insert, Save, Close

14. If medications are prescribed, those details may be recorded below the Health Concern itself. Use the Insert button to list multiple medications. Use the List of Medications hyperlink to find the exact spelling of a particular medication if you do not know it. Use the Psychotropic hyperlink to identify if the medication is psychotropic.

15. Once completed, 6 main components of the Health Concern page details will pre-fill back to the Medical/Mental Health tab, Health Concern Information group box. The Edit link can be selected to open the Health Concern page for modification(s). Multiple Health Concerns can be sorted by clicking on the column headers in the Health Concern Information group box. All of the information on this tab, as well as the information documented within the Health Concern page, can be viewed in the Medical Mental Health Summary document which can be launched from the Options drop-down.

Person Management 'Andrews, Annie M. (9222721)' -- Webpage Dialog

**eWiSACWIS** TM Print Spell Check Help

Basic Parent Info Additional Address Education Characteristics **Medical/Mental Health**

Health Concern ▲	Medical/Provider Name	Type of Service	Provider Type	Start Date	End Date	
Details of the health concern should be documented here...	<a href="#">Thomas, River</a>	Child Protective Exam/CPC Child Protective Exam	Physician	09/23/2008	09/23/2008	<a href="#">Edit</a>
Details of the health concern should be	<a href="#">Thomas, River</a>	Child Protective	Physician	10/03/2012	10/03/2012	<a href="#">Edit</a>

[Insert](#)

**Basic Information**

Primary Health Care Provider:  
 Physician: [Thomas, River](#)      Dentist: [Smith, John](#)      Mental Health:

☒ Immunizations Up To Date      Date: 05/10/2012      ☐ Immunizations Record On File

A request for the child's immunization record was made to:       Date Requested: 00/00/0000

**Immunization Information**

[Immunization Schedule](#)      [Wisconsin Immunization Registry](#)

Immunization	Date(s) Administered	
Measles, mumps, and rubella (MMR)	01/01/2009	<a href="#">Delete</a>

[Insert](#)

Options:  [Go](#)      [Save](#)      [Close](#)

16. After expanding the Immunization Information expando, the Insert button can be used to insert a new row within which the immunization and the date it was administered can be recorded. To view the most current immunization schedules, click on the Immunization Schedule hyperlink. To view the Wisconsin Immunization Program, click the Wisconsin Immunization Registry hyperlink.

17. After expanding the Growth Chart Measurements expando, the Insert button can be used to insert a new blank row within which the Percentile(s) of measurement(s), Age of Child, and Date of Measurements can be recorded.

The screenshot shows a web form titled "Growth Chart Measurements" with a blue header bar. Below the header is a table with the following columns: "Percentile of Child's Height", "Percentile of Child's Weight", "Percentile of Head Circumference", "Age of Child", "Date of Measurements", and an empty column. The first row contains the values: "98", "98", "95", "12yr", "01/01/2008", and a "Delete" link. An "Insert" button is located at the bottom right of the table.

Percentile of Child's Height	Percentile of Child's Weight	Percentile of Head Circumference	Age of Child	Date of Measurements	
98	98	95	12yr	01/01/2008	<a href="#">Delete</a>

[Insert](#)

18. After expanding the Health Insurance Company/HMO expando, the Insert button can be used to insert a new blank row within which the Insurance Company/HMO, Phone #, Policy #, Group # and Subscriber information can be recorded.

The screenshot shows a web form titled "Health Insurance Company/HMO" with a blue header bar. Below the header is a table with the following columns: "Insurance Company/HMO", "Phone", "Policy #", "Group #", "Subscriber", and an empty column. The first row contains the values: "Name of Insurance Company", "(555)555-1212", "LMM654321", "LMM654321", "Name of Subscriber", and a "Delete" link. An "Insert" button is located at the bottom right of the table. Below the table is a checkbox labeled "Child has chronic physical, mental, or emotional issues. Describe in detail."

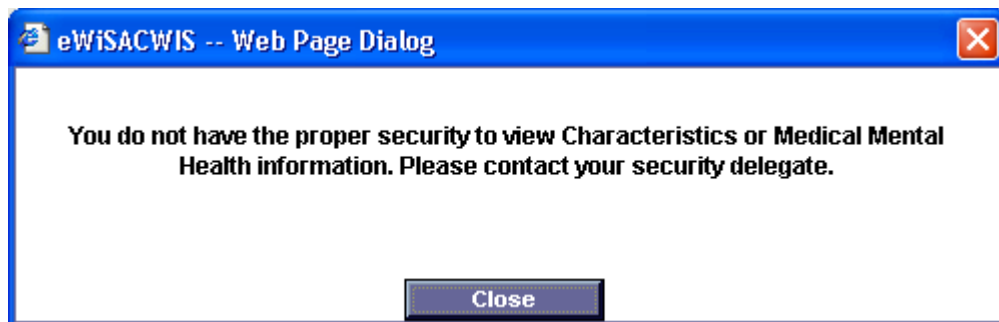
Insurance Company/HMO	Phone	Policy #	Group #	Subscriber	
Name of Insurance Company	(555)555-1212	LMM654321	LMM654321	Name of Subscriber	<a href="#">Delete</a>

[Insert](#)

☐ Child has chronic physical, mental, or emotional issues. Describe in detail.

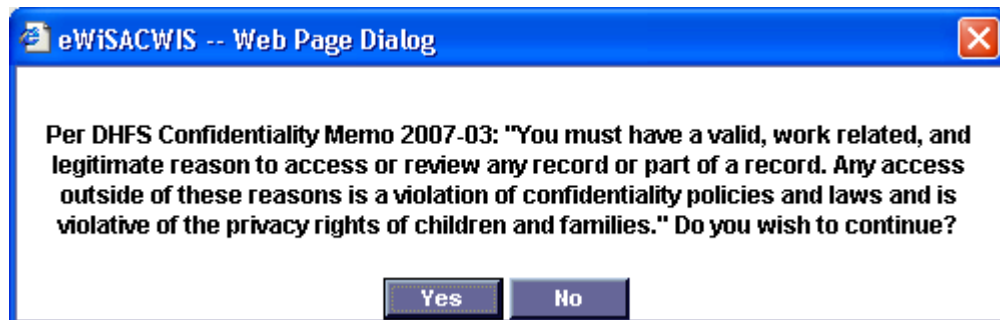
19. If you select the checkbox for “Child has chronic physical, mental, or emotional issues. Describe in detail.” or “Child has had a hospitalization, surgery, emergency medical need, or significant illness in the last six months. Describe in detail.” a narrative box will display for each question.

20. The Last AODA and/or Mental Health (MH) Evaluation and their associated dates, along with Emergency Contact Information, complete the information which can be recorded within the Medical/Mental Health tab. Select the Save button to save information across all tabs within Person Management.
21. This message will appear for those people who do not have security to view the Characteristics and Medical / Mental Health information on cases they are not assigned to through Search. They will not be able to view the information.





22. This message will appear for those people who have security to view the Characteristics and Medical/Mental Health information on cases they are not assigned to through Search. They will be able to view the information.



23. Each of the tabs contains an Options drop-down with the Assets and Income option. See the [Assets and Income](#) Quick Reference Guide.

A screenshot of the "eWiSACWIS" Person Management form for "Andrews, Annie M. (9222721)". The form has a purple header with the "eWiSACWIS" logo and navigation icons. Below the header are tabs for "Basic", "Parent Info", "Additional", "Address", "Education", "Characteristics", and "Medical/Mental Health". The "Basic" tab is active, showing fields for Name (ID: 9222721, First Name: Annie, Last Name: Andrews), Gender (Female), Birth Date (10/09/2005), US Citizen Status (U.S. Citizen), County Person ID, SSN (111-11-1111), Death Date (00/00/0000), HSR ID, MCI ID, Primary Language (English), and Second Language. There is also a "Race/Ethnicity/Tribal Identification" section with fields for Race (White), Ethnicity (Caucasian), and Tribal Membership #. An "Adoption Information" section includes "Child was previously Adopted" (No), "Type of Adoption" (Details), "Age Adopted", and "Pre-Adoptive Relationship to Child". At the bottom, there is an "Options" dropdown menu with "Assets and Income" selected, and "Save" and "Close" buttons.